

MICHAEL MCCLINTON

CONFIDENTIAL

IN THE UNITED STATES DISTRICT COURT  
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI  
NORTHERN DIVISION

EXHIBIT 14

ANGELA RUSSELL, AS ADMINISTRATRIX  
OF THE ESTATE OF JEREMY T. RUSSELL  
AND ON BEHALF OF THE WRONGFUL DEATH  
BENEFICIARIES OF JEREMY T. RUSSELL PLAINTIFF

VS. CASE NO. 3:22-cv-294-HTW-LGI  
MANAGEMENT & TRAINING CORPORATION;  
MICHAEL MCCLINTON; ASHLEY RAY;  
MARCUS ROBINSON; ROXIE WALLACE;  
JACOB VIGLIANTE; JOHN AND JANE DOE  
CORRECTIONAL OFFICERS;  
VITALCORE HEALTH STRATEGIES, LLC;  
EVELYN DUNN; STACEY KITCHENS;  
WILLIAM BRAZIER; and  
JOHN AND JANE DOE MEDICAL PROVIDERS DEFENDANTS

DEPOSITION OF MICHAEL MCCLINTON

taken on Wednesday, January 11, 2023,  
commencing at approximately 9:23 A.M.  
at East Mississippi Correctional Facility  
10641 Highway 80 West  
Meridian, Mississippi

\*\*\*\*\*CONFIDENTIAL\*\*\*\*\*

REPORTED BY: CYNTHIA HARRIS, RPR, CCR #1828  
SOUTHERN STENO REPORTERS  
3541 Highway 13 South  
Morton, MS 39117  
601-507-0849  
cynthiaharr@att.net

SOUTHERN STENO REPORTERS  
601-507-0849

MICHAEL MCCLINTON

# CONFIDENTIAL

Page 2

## APPEARANCES

GRAFTON E. BRAGG, ESQ.  
grafton@graftonbragglaw.com  
BRAGGLAW, PLLC  
1060 East County Line Road, Suite 3A-120  
Ridgeland MS 39157  
COUNSEL FOR PLAINTIFF

R. JARRAD GARNER, ESQ.  
jarrad.garner@arlaw.com  
RAY A. YOUNG, JR., ESQ. (VIA ZOOM)  
ADAMS AND REESE, LLP  
300 Renaissance  
1018 Highland Colony Parkway, Suite 800  
Ridgeland, MS 39157  
COUNSEL FOR MANAGEMENT & TRAINING CORPORATION,  
MICHAEL MCCLINTON, ASHLEY RAY, AND MARCUS ROBINSON

MICHAEL D. CHASE, ESQ. (VIA ZOOM)  
mchase@mitchellmcnutt.com  
MITCHELL, MCNUTT & SAMS  
105 South Front Street  
Tupelo, MS 38804  
COUNSEL FOR VITALCORE HEALTH STRATEGIES, LLC;  
EVELYN DUNN; STACEY KITCHENS; AND WILLIAM BRAZIER

ALSO PRESENT VIA ZOOM: JAMISON WILKINSON

MICHAEL MCCLINTON

CONFIDENTIAL Page 31

1 say "control," that's the person that works the  
2 picket. That means you're in the higher spot; you're  
3 looking down. It gives you a better view of what you  
4 could see.

5 But in camp 7 - because it's an acute unit, it's  
6 only like 14, 15 cells there - that person's down low.  
7 Everybody's there.

8 And camp 7 was originally designed for -- let's  
9 say if COVID had came around, if medical became  
10 overran with COVID inmates, housing unit 7 would give  
11 them the ability to house 15 inmates.

12 Q. Understood. With control, that's somebody who  
13 is watching the video camera?

14 A. No. That's someone that's watching the  
15 officer walk around. He's the eye -- let's say if the  
16 officer's walking around and the officer's making his  
17 rounds and another inmate somehow pops out of his door  
18 and run over there and grab him, if I'm over here  
19 looking this way, that person going to say, "Hey,  
20 watch your back. Watch your back. Hey, guy in 512 is  
21 out. Turn around. Turn around." So that's your  
22 eyes.

23 Q. So that control position actually has direct  
24 eyes on the camp support housing unit?

25 A. Yes, sir.

MICHAEL MCCLINTON

CONFIDENTIAL Page 32

1 Q. Or if the person is at that station. If  
2 there's somebody at that station.

3 A. Yeah, somebody at that station. You could sit  
4 there, and you would see all your cells.

5 Q. Could you see in the cells?

6 A. No, sir. Them things is camera, camera,  
7 camera, camera, camera, camera -- no, sir, you got to  
8 get out and go walk.

9 Q. So let's talk about -- here, let's do this.

10 MR. BRAGG: This will be 2.

11 (Exhibit 2 marked for identification.)

12 BY MR. BRAGG:

13 Q. I'm going to hand you a document that's been  
14 marked as Exhibit 2, and I'm going to hand you a pen,  
15 too. Do you recognize this document? Is it an  
16 accurate depiction of the camp support housing unit?

17 A. Yes, sir.

18 Q. All right. Do you see the little square  
19 that's marked "housing control"?

20 A. Yes, sir.

21 Q. Is that where the person who is assigned to  
22 control is supposed to be?

23 A. Yes, sir.

24 Q. Okay. Can you just put a "C" in that box  
25 right there?

MICHAEL MCCLINTON

CONFIDENTIAL Page 33

1 A. Inside the big box itself like this, sir?

2 Q. Inside the housing control box where the  
3 control person would be assigned.

4 A. Yes.

5 Q. And you did mark that "C"; correct?

6 A. Yes, sir.

7 Q. So we talked about the first position under  
8 housing unit 7. What's the second position?

9 A. Second position would be the floor -- the  
10 floor.

11 Q. What is that?

12 A. That means that's the person that's going to  
13 walk around and do -- You could walk around and  
14 make -- make your rounds.

15 Inmate got to go to the shower. You the one that  
16 go out there, let him out, escort him to the shower.  
17 Once you get him to the shower, you will actually lock  
18 the -- lock the shower doors.

19 If he's going to the rec yard, you'll be the one  
20 to take him out of the cell, unlock the rec yard door,  
21 put him on the rec yard, shut the door behind you so  
22 can't nobody get out there to him.

23 And you the one that make -- make your rounds.

24 Q. Okay. So you're the one that's sort of  
25 actively dealing with the inmates?

MICHAEL MCCLINTON

CONFIDENTIAL Page 54

1 blanket. He can have his mat," but they make that  
2 call. We're just there to carry it out.

3 Q. So there's a little more nuance for non-acute  
4 suicide watch?

5 A. I would -- I would have to look up the -- I  
6 would have to look at the verbiage of it to give you  
7 the exact answer. But my answer to them -- I ask, "Is  
8 he one-on-one? Can he have anything?"

9 And they'll say, "No."

10 And if they say, "Yes, he can have a" --

11 I say, "Well, what can he have?" And I'll make  
12 sure that's what he gets.

13 Q. So whenever someone's in suicide watch,  
14 there's a conversation with correctional officers and  
15 medical as to what the --

16 A. The mental health staff will tell you exactly  
17 what he can have. And he'll remain that way until the  
18 mental health staff either takes him off or upgrades  
19 him, but they the ones that does that.

20 Q. That makes sense. So let's talk about camp  
21 support now.

22 A. Uh-huh.

23 Q. Camp support, like suicide watch, the inmate  
24 is alone in their cell. There's nobody in the  
25 inmate's cell with him. Would you agree with that?

MICHAEL MCCLINTON

**CONFIDENTIAL** Page 57

1 defecate in the cup and dash it on the officer, we'll  
2 write him an RVR for the assault, and I will place  
3 that offender on 72-hour property restriction.

4 Now, when I put him on property restriction, he'll  
5 keep his boxers and T-shirt.

6 Q. But no bed sheet at that point?

7 A. No bed sheet, no nothing at that point.

8 Q. So you identified some sort of security  
9 reasons why somebody would be on property restriction.

10 A. Right. And that's somebody start a fire.  
11 When they start a fire, they set their clothes on  
12 fire. That's the only thing they can set on fire  
13 because of the steel cell. So we take his property so  
14 he has nothing to burn.

15 Q. Are there any mental health reasons that  
16 somebody would be on property restriction?

17 A. Then they'd be one-on-one suicide.

18 Q. Okay. So if somebody's in camp support,  
19 they're not on one-on-one suicide; agreed?

20 A. No, sir. No, sir.

21 Q. And if there are mental health property  
22 restrictions, that can only happen in the context of  
23 one-on-one suicide; is that right?

24 A. Excuse me, again, now?

25 Q. So property restrictions that are a result of

MICHAEL MCCLINTON

CONFIDENTIAL Page 58

1 a mental health order, that would only --

2 A. Property restriction as a result of a mental  
3 health order. Mental health, he's either going to be  
4 one-on-one suicide, or he's -- they're going to say  
5 he's limited to what he can have, but that's coming  
6 directly from medical.

7 If security -- if I place him on one, that means  
8 he done, done something, like I said previously.

9 Q. Right.

10 A. He done started a fire. So if I take the  
11 property, he ain't got nothing to burn.

12 But what we don't do is we don't take -- we don't  
13 give him a shroud and have him just a shroud. Medical  
14 has to authorize the complete one-on-one suicide.

15 Myself, as a captain or a major, cannot say, "This  
16 guy's going on one-on-one suicide."

17 Q. Okay. Has there ever been a situation where  
18 medical authorized a property restriction, but the  
19 inmate was not placed on one-on-one suicide?

20 A. Yes. When they can do the -- when they can do  
21 the non-acute -- when they say, "He can have his  
22 blanket. He can have this." You still sitting there  
23 -- you still sitting there with him, but he can have  
24 some of his stuff.

25 Q. But that's still a form of suicide watch?



MICHAEL MCCLINTON

**CONFIDENTIAL** Page 59

1 A. Yes.

2 Q. Is there ever a situation where medical  
3 authorized a property restriction while the inmate was  
4 housed in camp support?

5 A. No, sir. Medical don't -- that's a security  
6 situation because that's a security issue. Because --  
7 the way they describe it here is this is a mental  
8 health facility.

9 So before we go any type of use of force, any  
10 planned use of force on an inmate, I have to go  
11 through the planned use of force procedures.

12 That procedure is to get a mental health provider  
13 down there so they can lay eyes on him in a mental  
14 health capacity.

15 Once they lay eyes on him in a mental health  
16 capacity and they do whatever conversation -- whatever  
17 they do with the inmate, they're going to turn to me  
18 and say, "Major McClinton or Captain McClinton, this  
19 is a true mental health incident; therefore, do not  
20 proceed with use of force," and I will stand down.

21 But if they turn to me and say, "Major McClinton,  
22 this is not a mental health issue; this is a  
23 behavioral issue. Proceed with your planned use of  
24 force," and we'll proceed with the planned use of  
25 force.

MICHAEL MCCLINTON

CONFIDENTIAL Page 60

1 Q. Okay. So in camp support, a bed sheet could  
2 be taken away because of a security-based property  
3 restriction; is that right?

4 A. We just wouldn't take the bed sheet. We'll  
5 take all his property.

6 Q. In addition to everything else.

7 A. Yeah.

8 Q. But property isn't taken away in camp support  
9 because of a mental health recommendation? That  
10 doesn't happen in camp support?

11 A. If the mental heath -- no, no, sir. Because  
12 if mental health going to say he's a one-on-one, he  
13 needs to be transported to medical.

14 Q. Then he's in medical on suicide watch?

15 A. Then he's in medical stuff. Yes, sir, so  
16 that's correct.

17 Q. Is there a video camera that is on camp  
18 support?

19 A. We have a camera system called Pelco. It's on  
20 everywhere we go. It's just not in here. It's not in  
21 here. It's not in the restrooms.

22 Q. Is it monitored?

23 A. Pelco, being if we had to go pull some  
24 footage, we could go back on a date and time and pull  
25 that particular footage. Just someone sitting down,

MICHAEL MCCLINTON

CONFIDENTIAL Page 79

1 And when I go say, "Hey," I expect to get some  
2 type of response from the inmate.

3 Now, a lot of times -- I remember it being early,  
4 too. A lot of times when you wake the inmate up and  
5 he doesn't want to get up, he's going to say something  
6 derogatory. I don't want to say it on tape; we have a  
7 female in here. He's going to say something  
8 derogatory or inappropriate, profanity, but that's  
9 letting me know he's alive and well, just don't want  
10 to be bothered.

11 So I called for him again. I didn't get no  
12 answer. At that time, I bent down and pulled the tray  
13 slider and looked. My words, "Man, what the hell  
14 going" -- and I looked. "Oh, wow. Wait a minute.  
15 Medical assistance camp support. Medical assistance  
16 camp support. I need somebody in camp support."

17 At that time, when I called "medical assistance  
18 camp support," the captain's calling for medical  
19 assistance. He had come up. Here come a bombardment  
20 of people coming in say, "Hey, Captain. What's going  
21 on?"

22 "We got to get this guy out. Something's going  
23 on."

24 At that time, Lieutenant Ray, Sergeant Robinson, a  
25 couple of people from medical, couple other people

MICHAEL MCCLINTON

CONFIDENTIAL Page 80

1 there. Access the door, go in there. I say, "Holy  
2 crap." I looked up. He had something around his neck  
3 like he was attempting to sit, but the ligature was  
4 too short for him to sit down, so he just plopped  
5 there until he passed.

6 But we expeditiously got him down. Once we got  
7 him down we -- because the gurney, stretcher all that  
8 was coming -- all that was there. Got him down, got  
9 him on the -- this all within like a minute or so.  
10 That's how fast it was.

11 Q. A minute from when to when?

12 A. I want to say at least a minute from the time  
13 I called for help, we had him -- got in -- you know,  
14 when you're doing this, minutes seem like hours  
15 because you're there, you know.

16 You know, we can always armchair quarterback it  
17 when you're not there, but when you're there, the  
18 adrenaline is pumping.

19 And we get him there, and I remember the nurse  
20 doing CPR. We doing this; we doing this.

21 "Everything's going to be okay. Everything's  
22 going to be okay. Just hang in there."

23 He was unresponsive, but we still talk to them,  
24 trying to -- try to keep people calm.

25 They was pumping on his chest, you know. They got

MICHAEL MCCLINTON

CONFIDENTIAL Page 81

1 him to medical. They continued to pump on his chest  
2 and everything.

3 The doctor called in -- when we've got somebody  
4 that's unresponsive, we always call 911. Got him in  
5 there, and they're working on him and all this stuff.  
6 I can't remember the actual time, but they called the  
7 actual death.

8 I don't know if the paramedics had got here, but  
9 they called it.

10 Okay, but now what stands out the most in my mind  
11 is Dr. Arnold, who's the medical doctor. You know,  
12 he's doing this stuff. He coming doing his final  
13 assessment. And by me being a previous investigator,  
14 my background -- it's why I love it so much. I know  
15 certain things you need to get right away.

16 I asked -- say, "Can we get a -- can we get a core  
17 temperature? What's his temperature?"

18 And Dr. Arnold, he kind of think -- he sort of  
19 think the way I think about it.

20 And when Dr. Arnold took his -- because I  
21 inadvertently said it. "Hey, let's make sure we get a  
22 temperature on him," you know.

23 When they got his temperature, his core  
24 temperature was 96 something -- 96 something. And  
25 Dr. Arnold said to me, "Hey, I don't want you to beat

MICHAEL MCCLINTON

CONFIDENTIAL Page 82

1 yourself up now."

2 I said, "Why would you say that, Doc?"

3 He say, "In my medical professional opinion, if  
4 you could have been at least 2, 3 minutes earlier, you  
5 possibly could have saved him."

6 And I can just go, "Wow."

7 But then I -- then you start backtracking your  
8 steps saying maybe I didn't need that soda. Maybe I  
9 didn't need to go talk to the warden. Maybe I didn't  
10 -- but then I -- but then I answered my own question.

11 If I didn't do that and went straight to the  
12 office, I would have passed right past the nurse, and  
13 it ain't no telling how long it would have been there,  
14 or they would have found him when they came in.

15 So you have to recap, "What did I do wrong?"

16 Q. Yeah.

17 A. And I'm like maybe I shouldn't have got that  
18 damn soda. Maybe I should have did this; maybe I  
19 should have did that. But then that's why he told me,  
20 "Don't beat yourself up."

21 I don't want to sound crazy or nothing like this,  
22 you know.

23 Q. Yeah.

24 A. I mean, we have to live with this. I  
25 understand somebody lost a loved one, but, you know,

MICHAEL MCCLINTON

CONFIDENTIAL Page 110

1 Q. -- at a different cell?

2 A. You're right; you're right. Exactly right.  
3 So there's a possibility that that could have been his  
4 cell.

5 Q. Okay. And so do you actually see that you  
6 called medical assistance from --

7 A. I picked --

8 Q. -- 11:23 --

9 A. I picked the phone up and called, yes. I  
10 picked up the phone -- I picked up the -- I picked up  
11 the radio and called, not phone but radio.

12 Q. So at that point, you were on the phone with  
13 medical assistance.

14 A. I'm on the radio.

15 Q. On the radio.

16 A. I'm on the handheld.

17 Q. Why did you see the need to call for medical  
18 assistance?

19 A. Because at that point, I realized he might not  
20 be playing. And at the same time, even when we do  
21 call medical assistance, they still not going to  
22 access the door until people -- backup get there.

23 Q. Is that always true?

24 A. Oh, yes, that's -- that's the protocol.  
25 That's what should happen.

MICHAEL MCCLINTON

CONFIDENTIAL Page 111

1 Q. So the protocol is if you have two people, and  
2 you see Jeremy Russell needing medical assistance,  
3 you're not going to open that door until backup gets  
4 there?

5 A. Yes. I'm going to wait on -- I'm going to  
6 wait on backup. Backup has to be there because he  
7 could be playing. He could be --

8 And we done had inmates here in the past to play  
9 like that.

10 We had one inmate that he had faked his own  
11 hanging and had people think he was hanging. And when  
12 the door came open, guess who was standing on the  
13 ground ready -- ready to fight? The inmate.

14 And a lot of lessons you get in the prison, it's a  
15 bought lesson. You're going to have to eat them licks  
16 to face it. To say, okay, I have to make a decision.  
17 Am I fixing to put myself in harm's way, or I'm fixing  
18 to try to be a hero, or do I need to wait for that  
19 backup?

20 Q. So even if he had been -- even if it looked  
21 like he was hanging at that point, you would have  
22 waited for backup?

23 A. If I would have saw -- that's -- that's what  
24 the protocol says. That's what the protocol says.

25 Q. Okay. So at 11:23:17, it's pretty visible



MICHAEL MCCLINTON

CONFIDENTIAL Page 146

1 A. The scanner is a better way to do it.

2 BY MR. BRAGG:

3 Q. So why do they do a strip search, if you know?

4 A. Well, that's the part -- that's what they have  
5 in place here.

6 Q. Why don't they add a scanner over to that  
7 area?

8 A. You're asking me to speculate on why somebody  
9 don't want to -- I'm not comfortable to answer the  
10 question why they won't do it.

11 Q. Are you aware of any employee of MTC being  
12 disciplined for bringing in illegal narcotics?

13 MR. GARNER: Object to the form. Can you  
14 narrow it? I mean, ever?

15 BY MR. BRAGG:

16 Q. Well, since the time you've been here in 2019.

17 A. Oh, they -- they come through here with drugs  
18 all the time, and they get -- and they get prosecuted.

19 Q. Employees do; is that right?

20 A. Oh, yes, sir. They -- they -- once they get  
21 caught, Lauderdale County Sheriff comes, gets them up,  
22 and the warden makes sure they walk out of here with a  
23 silver bracelet on, with their hands behind their  
24 back.

25 Q. Have there been any this year? We're just in